

# Best Available Copy

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		12/8/83
O.I.P.E. CLASSIFIER		12	12/10
FORMALITY REVIEW		11421	115

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/8/83
2	✓	✓	12/8/83
3	✓	✓	12/8/83
4	✓	✓	12/8/83
5	✓	✓	12/8/83
6	✓	✓	12/8/83
7	✓	✓	12/8/83
8	✓	✓	12/8/83
9	✓	✓	12/8/83
10	✓	✓	12/8/83
11	✓	✓	12/8/83
12	✓	✓	12/8/83
13	✓	✓	12/8/83
14	✓	✓	12/8/83
15	✓	✓	12/8/83
16	✓	✓	12/8/83
17	✓	✓	12/8/83
18	✓	✓	12/8/83
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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